To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

SCOTT WALKER RECALL PETITION

THE MUNICIPALITY USED FOR MAILING	FURPOSES, WHEN DIFFERENT THAN MUNICIPAL	ITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	IICIPALITY OF RESIDENCE MUST ALWAYS	S BE LISTED.	
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
FRED PAESEL	Isal Paisel	Street: 4/65. Blount St City: Madison, W/Zip: 537B	Town Utillage MA deson	(Month) (Day) (Year)	Email
ELLEN LAST	Elendos	Street: 7343 TREE LANE City: MADISON Zip: 53717	Town Uvillage Scity  AD ISON	///5/20// (Month) (Day) (Year)	Email Phone
MARIE McCabe	mariemacabe	Street: 6209 Mineral Pt. Rd  TH 1203  City: Madeson Zip: 53705	Town Village Madison	11 /15/20 11 (Month) (Day) (Year)	Email Phone
Trene Ilgen	Irene Ilgen	Street: 6205 Mineral Pt. Road  City: madisin Zip: 53705	Town Uvillage De City  Madren  July	// /5/2011 (Month) (Day) (Year)	Email Phone
5. Mary Becker	Many Buku	Street: 5760 Monticello Way	Town Village Titchburg	// /5/20 <u>//</u> (Month) (Day) (Year)	Email Phone
"CHARLES PILS	Charles Pol	Street: 572 5 CEPAR PL  City: MAD150N2 W1 Zip: 53705	Town Village MAN 150N	11/5/20/1 (Month) (Day) (Year)	Email Phone
Margot Peters	Charget etus	Street: 511 College St.	Town July Village LAKE MILLS	// //5 / 20 <u>[[</u> (Month) (Day) (Year)	Email Phone
SAMES M. LEIDEL	Johns M. Level	Street: 6321 WALDEN WRY  City: MADISON, WI Zip:53719	Town Utillage MADISON	// //5/20// (Month) (Day) (Year)	Email
o. Theodore G. BELL	Theory Soll	Street: 11 Court of Brixham  City: MADTSON Zip; 33705	Town Village MAD I 30 N	///5/20/1 (Month) (Day) (Year)	Email Phone
201 ko Etabla	Theele	Street: 434 N. WOSTfield F. City: Maohson Zip: 53717	Trown CITY OF July Decity MADISON July	(Month) (Day) (Year)	Email Phone
Tan-1 11 1-	Certification				
JAMES M. LEIDE  (Name of Circulated this recall patition and arms. I'll take	lator)	tify): I reside at		Municipality)	Cir

the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

(Signature of Circulator)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S 9 10 of the Wisconsin Statutes

	F PURPOSES, WHEN DIFFERENT THAN MUNICIPALI		TICIPALITY OF RESIDENCE MUST ALWAYS	S BE LISTED.	
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Aleshia Johnson	AJohn	Street: 5817 Balsan 20 City: Madison WI zip: 53711	Town Madison		En
2. Angelique Bursey	Abuseix	Street: 6404 Raywond Rd City: Machison Zip: 53711	Town Village Madi SOW	// / / \$\frac{1}{20}// \(\ldots\) (Month) (Day) (Year)	Ph
! Leon Tunstall	Jean Juntal	Street: 2335 Chall+gadens#4  City: Madisan zip: 5371/	Town Village OS-City Madi 500	(Month) (Day) (Year)	Ph
DaneGosklaus-With	Dears & Con Whit	Street: 2306 Canterbury Rd City: Madison W/ Zip: 537/1	Town Village Madism	// //5/20// (Month) (Day) (Yeal)	Pho
S. JEFFRE ARIYU	Barlel	Street: 5809 19 FAX (2000) 12 City: [74] 1800 (1) Zip: 537 11	Town Village City	(Month) (Day) (Year)	Ph
"Richard tenno!	Ludburg	city: Fitchburg zip: 53711	Strown Original Franchiscope City Franking	Nonth) (Day) (Year)	Ph
7. Donna Fenne	Donadene	Street: 2335 Order 60 dens & #4  City: Fitch source zip: 53711	Town Village Fitchburg	1) /15/20 <u>1</u> (Month) (Day) (Year)	Pho
8. Frederick J. Janacek	Trebent of Janear	Street: 5929 Mayh, 11 Dx City: Mad, son zip: 537/1	Town Village Malison	1(//5/20// (Month) (Day) (Year)	Pho
Roy A. Noffke	Hoy a Noffke	Street: 6605 Redmont Road City: Madison zip: 53711	Town Village Madison	11 /15/2011 (Month) (Day) (Year)	Pho
10.		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20 (Month) (Day) (Year)	Pho
Jane E Not	Certification (cert	of Circulator ify): I reside at 665 Piedmon	+ Rd City o	f Madisor	1

City: 100 150 M Zip: 537 1 1 2001	(Month) (Day) (Year)
10. Street:	/ /20
City: Zip:	(Month) (Day) (Year)
Certification of Circulator	
Jane E Noffke , (certify): I reside at 605 Piedmont Rd	City of Madison
(Name of Circulator) (Circulator's Residence – Street name and Number)	(Circulator Municipality)
personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in the epaper with full-knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is pur	
11 1 15 12011 and & Motte	Page No. (Official Use Only)
(Month) (Day) (Year) (Signature (	# 1952

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.						Ma
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING		CO
Carole McEvoy	Parole M' Evoy	Street: 5813 Meadowood Dr. City: Madeson 21p: 53711	Town Village	// /5/20_// (Month) (Day) (Year)	Email Phone	
Janel Buckley	Janel Buhley	Street: 2135 Muir Field Rd #4  City: Madison zip: 53719	Town Utillage City Madison	// //5/20_// (Month) (Day) (Year)	Email Phone	)
3. Nancy S Evans	Dancy Edam	Street: 5072 BlackOak Par City: Madison W= zip: 53711	Town Village Parcity Mach 200	// // // // // // // // // // // // //	Email Phone	)
1. Nicole Haworth	Nicol Hawoth	street: 7202 Ravenswead Rd  City: mad 1507 WI zip: 537//	□Town □Village □City  Mad: San	!///5/20	Email Phone	)
5. Juliann Mutch	John Britch	street: 2101 Manor Green Dr City: Machison WI zip: 53711	Town Village XCity MOXISO	/	Phone (	)
6. Linda Hochstatter	Linda Hochstatter	street: 6608 Schroeder RL #23  City: Madexon Will zip: 53711	Town Village Madeson	///5/20 <u>/1</u> (Month) (Day) (Year)	Email Phone	)
Mary J Raup	Mary Jack	Street: 6133 Birch Hill Dr City: Madison Zip: 53711	Town Village Madison M	///5/20 <u>//</u> (Month) (Day) (Year)	Phone	)
MICHAEL METON	michael D. meton	Street: 5982 SCHROEDER RD, APT. H City: MADISON Zip: 537/1	Town Village MADISON	// //5/20// (Month) (Day) (Year)	Email Phone	)
soft Marke	Mode	Street: 1614 GOLDEN! OAK  City: MAUISON W/ Zip: 53711	Town Village MAI)ISON	// /5/20// (Month) (Day) (Year)	Email Phone	
10. Cuf (0/1/2	on:	Street: 3156 Muirfield Rd. Adl. 3° City: Madison zip: 53719	Town Village Mad Syn	// //5/20//_ (Month) (Day) (Year)	Email Phone (	)
	Certification		a A. I P	·n0 ·	,	
Jane E Nof	cert (cert	tify): I reside at 6605 Piedmont 1	Rd City of	Madison	Cinani	latora -

C 24. (0.1.)	·) CFC	city: Madison	zip: 557(9) 45.19	(Woman) (Day) (Tear)
	Certification	of Circulator		
Jane E No	ffke ,(ce	ertify): I reside at <u>6605</u> f	Piedmont Rd	City of Madison
	Circulator)	`	lesidence – Street name and Number)	(Circulator Municipality)
	lly obtained each of the signatures on this paper. I know the			
e paper with full knowledge of its content on the dat	te indicated opposite his or her name. I know their respecti		etition. I am aware that faisifying this certifical	tion is punishable under S.12.13(3)(a), wis. Stats.
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Jane & Noffk	Jane & Mayke	street: 6605 Piedmont Rch city: Madison zip: 5371/L	Town Uvillage Madison	// /5/20// (Month) (Day) (Year)	Email Phone	
oheryl J Zeegers	Cheryl J Zeegers	Street: / Cocoa Beach in City: Hadrson WI 21,53719	Town Village Madison	// 1/5 / 20 <u>//</u> (Month) (Day) (Year)	Email Phone	
3. MaryWWalsh	Mary W. Walsh	city: Madison WI zip: 53711	Town Village Madison	// /5/20// (Month) (Day) (Year)	Phone (	
Susan Jackson	SJackson	1 (4)	Town Utillage MadiSon	//5/20// (Month) (Day) (Year)	Phone (Email	)
"Cristine Reid	(Muil)	city: Sun Prairie Wi zip: 53590	KTown Bristol City	//5/20/1 (Month) (Day) (Year)	Phone (Email	)
Tierra Jackson	Devia Jackon	Street: 5743 RUSSEH ROL # 1C City: Marchison zip: #453711		/\S/20	Phone (	)
WEST JONES	West poet	Street: 2018 WETBROOK CANERS. City: MDSN. Zip: 59711	Town Village MAITSON	// /5/20 <u>7/</u> (Month) (Day) (Year)	Email Phone	
Eric Holmes	Eine Holmes	Street: 1202 MCKenna Blud# 100 City: MADISON, WI Zip: 53719	Town MADISON	(1 / 15/20 11 (Month) (Day) (Year)	Email Phone	
EARL UPDIKE	En P Unite	Street: 6671 RAYMOND R.1 City: MAPISON Zip: 53711	Town Uvillage City MADISON	// //5/20_1/ (Month) (Day) (Year)	Phone (	
MARY L. UPdik	1 1		Town Village MAd150n	11/15/20 <u>11</u> (Month) (Day) (Year)	Email Phone	
Tane F Nafi	Certification	of Circulator 6605 Pieamont Ro	em 1 to 5	Madisa	n	

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Madi THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. DATE OF SIGNING STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE CONT SIGNATURES OF ELECTORS PRINTED NAMES OF ELECTORS (Indicate Town, City, or Village) Rural address must also include box or fire no. 1. ☐ Town 11/15/2011 Village City Valance L Nichols Phone zip: 53515 Email ☐ Town Dillage ☐ City ? Phone Month) (Day) Email 3. Gasdons 1 AKEWOOD (Month) (Day) Phone City JAC MADISOM zip: W Email ☐ Town ₩Village Phone City De Forest Email □ Town Village City Phone (Month) (Day) (Year) Email □ Town ☐ Village Phone RCity Beaver Dam zip: 53916 Email ☐ Town ☐ Village Phone Email Town
Village
City Phone mail hone mail

	1221111100	1007   1		City: JPI 17 a	CV Zip: O J J J	1 10116		1
	9.		•	Street:	Zip:	☐ Town ☐ Village ☐ City	/ 20 (Month) (Day) (Year)	P
	10.			Street:	Zip:	Town Village City	/ /20 (Month) (Day) (Year)	P
Ι, _	James	R. Bicame of Circulator)	eletelat	cation of Circulator, (certify): I reside at	Circulator's Residence - Street name ar	ST CBSVerova ad Number) (Circulator	53593 Municipality)	
I po	ersonally circulated this recall petition and paper with full knowledge of its content of the co	personally obtained ea on the date indicated op /20 // (Year)	ich of the signatures on this paper. posite his or her name. Visual thei	I know that the signers are electors in respective residences by the including the control of th	of the jurisdiction or district represented by the port this recall petition. I am aware that falsify ulator)	ying this certification is punishable under S.1	that each person signed 2.13(3)(a), Wis. Stats.	

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James Bielefeldt	Jamo PSielefeld	street: 664 Grace ST City: Verdua zip.53593	Town Village Verona	/15/2011 (Month) (Day) (Year)	Email Phone
2. MARY BLASER	may Ber	Street: 2102 MANGR ER DR	Town Village MA'DISN	11 /15/2011 (Month) (Day) (Year)	Email Phone
3. KARRA VANDEN BAR	ed Karen On Bros	Street: 5306 FLAO AGE City: Madrson WI Zip:53711	Town Village City MAD (500)	i( / i < / 2011 (Month) (Day) (Year)	Phone (
Futhleen Holmes	Kulkleen Homes	CHANGE AND WI ZIES 3212	Town Uillage Bacity Mudal Kefon	///5/20// (Month) (Day) (Year)	Phone (
Donald Dorn	Donald R. Dorr	Street: 1017 Gateway Pass City: Verong zip: 53593	Town Village VE Cona	// /15/20// (Month) (Day) (Year)	Email Phone
John Pike	John C. Pike	Street: 4728 Regent Street City: MADISON Zip: 53705	Town Village WADISON	// 15/20// (Month) (Day) (Year)	Email Phone
Linda Juno	Tinda Juno	street: 1306 Temkin AM  City: Madison Zip: 53701	Town Village Madison	////5/20 <u>//</u> (Month) (Day) (Year)	Email Phone
Karen Pautzke	Karen Partile	Street: 511 Mar & DT City: De rona WI zip: 53593	Town Village V C (Ma	(Month) (Day) (Year)	Email Phone
Lynn Nachreiner	Lemn Hacken	street: 212 Statz Canl City: Jane Zip 5859	Town Dyillage Dane		Email Phone
Julie Moger	Delei Mayer	Street: 4693 CTV FT City: Blue mound ( Zip: 53517)	Town Village Vermon	// /15/20/ (Month) (Day) (Year)	Email Phone
James P Biele (Name of Circula	ator)		d Number) (Circulator N	// 53593 Municipality) hat each person signed	Circulator Phone

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Ma THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. MUNICIPALITY OF RESIDENCE DATE OF SIGNING CO STREET & NUMBER OR RURAL ROUTE PRINTED NAMES OF ELECTORS SIGNATURES OF ELECTORS (Indicate Town, City, or Village) Rural address must also include box or fire no. Email ☐ Town IANICE WATZKE Village ☐ City Phone Email ☐ Town ₩Village
☐ City Phone Email Phone Email □ Town ☐ Village Phone City City Email ☐ Town ☐ Village Phone (Month) (Day) zip: 53705 Email Town ☐ Village Phone City Waso Town Email ☐ Village Phone Email ☐ Village Phone Email Phone City City Email 10. ☐ Town ☐ Village (608 **Certification of Circulator** 

(certify): I reside at (Circulator's Residence - Street name and Number) (Circulator Municipality) (Name of Circulator) I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its content on the date indicated opposite his or her name//knowledge of its (Signature of Circulator) (Month) (Day)

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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1. Shewe Harris	Sherie Harris	Street: 415 Moorland Rd 4104 City Madi 8M WI 21p: 53713	Town Village  Nach Son	///5/20 <u>//</u> (Month) (Day) (Year)	Email Phone
2. Linda Wiese	Jida Wiere	Street: 907 LIWKS OR City: POUN PHOUS Zip: 53955	Town Poynette	(Month) (Day) (Year)	Email Phone
3. Jolene Thompson	Hene Thampson	street: 21/2 Browning Dr. City: Janesuille zin 53546	Town Village Janesu; We	Mouth) (Day) (Year)	Email Phone
4. William J. Clark In	William Whit	Street: W2004 CTY HWX EE  City: Albany WI zip: 53502	Town City Albany	// /5/20// (Month) (Day) (Year)	Email Phone
5. Adams. Michie	Adams. Michan	street: 1204 N. Gemmon Rd. city: Middleton, WI zip: 5356Z	Town Village Middleton	\\\\/\(\lambda\)/\	Phone (
Chery Reege	Chyl Reese	Street: N201 Huy J City: Looli W, zip: 53555	Trown   City   City	11/15/2011 (Month) (Day) (Year)	Email Phone
7. Rick Galbraith	RIF	street: 5617 Bjelde LANE#1  City: Monona, WI zip: 53716	Town Village MONONA	11 /15/20 (Month) (Day) (Year)	Email Phone
8. Danier J Chinit	Carriel Atchor	Street: 10 N MADISON ST City: EUANSVILLO WI Zip: 53536	Town Uillage Town SUILLE	// //5/20/1 (Month) (Day) (Year)	Email Phone
BARBORD A. OKOUSK	Barbara Mond.	Street: 6008 Sylvan Lane City: Monona UI zip: 537/6	□ Town □ Yillage □ City Monda Na	////5/20 <u>//</u> (Month) (Day) (Yenr)	Phone (
KathleenM. Legris	Kathleen M. Legis	Street: 4800 Westman Ct. City: Middletton WI zip: 53562	Town   City Middleton	// //5/20 <u>/ </u> (Month) (Day) (Year)	Phone (
James R Bielet	Certification (cer	of Circulator tify): I reside at 64 Grace St	CITS Verova	53593	 Circule

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

	nstitution and S.9.10 of the Wisconsin State PURPOSES, WHEN DIFFERENT THAN MUNICIPALE	TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.	
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Kimbe-ly Hagelbarger	Knleige Langer	street: 102 Prairie Height Strett 4/11  City: Verona INI 21p: 53593	Y City VCCONA		Pho
Chay I muc	Cherria mie	street: 1717 High Point (V)	Town Village City  City	(Month) (Day) (Year)	Em
Ruth Tisdale	Ruth Jesdule	Street: 6430PheasAN LN 314 City: M. Adleton ZipW15	Town Village City  Meddleton	(Month) (Day) (Year)	Em
Renée LaVoie	René favoie	street: 309 Frost Woods Rd.  City: Monona zip: 53716	Syllage Monona		En
Eric Hart	En 21	Street: 109 Deer Xing City: JUMSONCHEW, Zip: 53038	DTown  Willage  City  WEY		Pho
Wendy Jones	Wendy Jones	street W10739 & Harmony Dr City: Local W1 zip: 53555	Strown Village City	[Month] (Day) (Year)	Em
June Manders	Amu	Street: 870 Closer Ln  City: Oregon zip: 53575	Town City Oregon	// //5/20_1\ (Month) (Day) (Year)	Pho
ThomasFischer	Thomas Fincher	street: 2694 Chesapeake Dr city: Fitchburg zip. 53719	Down Village Ville Village Scity	11/15/2011 (Month) (Day) (Year)	Em
Heidi Lin	Mandi Join	street: 508 N. Midva (2018LVD) City: Mardi 50 n zip: 53705	Town Village City Mach 50 W	11/(J20_1\ (Month) (Day) (Year)	En
Theresa Burkelan	Theresa Burk land	Street: ÎLe ID Windsor ST City: SUN Prairie zip: 53590	Town SN Uvillage SN Deity Prairie	11 /15/20_\(\frac{1)}{(Month) (Day) (Year)}	Em
James R B (Name of Circully circulated this recall petition and personally obt	certification (certification)		LB CtyfVerona (Circulator M	est anch namon signad	

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

icle XIII, Section 12 of the Wisconsin Co	onstitution and S.9.10 of the Wisconsin State	utes.			1
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"Becky N Beck"	In Soul	street: 441 Nygaard St city: Stoughton WI zip: 53589	Town Village Stoughton	11/15/20 <u>11</u> (Month) (Day) (Year)	Email O Phone
Terri Moen	Ten L. Main	Street: 5519 Calico Dr.  City: Madison W1 zip: 53718	Town Willage Madi SON	// //5/20// (Month) (Day) (Year)	Email / Phone
"Sandra Graf	Sander of Siey	street: Na438 KreatzRd.	Town Utillage City Sumner	// //5/20 <u>//</u> (Month) (Day) (Year)	Email Phone
Dannifer Brady	Jerif M. Brody	street: 4933 Minoral Point Rd #44 city: Madison, WI zip: 53705	Town Village Madi Son	(Month) (Day) (Year)	Email Phone
i. Rhonda J. Workmen	Rhondin	street: 6909 N. CO, PO. M#67  City: Evansville WI zip: 53536	Town Village	71 /15/20 <u>/(</u> (Month) (Day) (Year)	Email Phone
BILL LALLEY	Willi M. Lall.	Street: 6781 PRAIRIE VIEW DR City: SUN PRAIRIE Zip: 53590	Town	/\ / (\$\forall 20_{(\text{Month}) (Day) (Year)}	Phone
i. Corissa Engel	Coursas	Street: 1934 Shelley In	□ Town □ Village  © City Mod \ SOO	/\ /\5/20 <u>\ i\</u> (Month) (Day) (Year)	Email 131
s. Barbara vo Nmer	Barbar Vollmer	street 4618 N Sherman ave	Town Village City  Town	11 /5 /2011 (Month) (Day) (Year)	Email Phone
o. RANDALL C BORCHERS	Rand O Mulen	Street, 2302 FREMONT AUE City: MADISON WI Zip. 53704	□ Town □ Village 風City MAOISON	///15/20 ff (Month) (Day) (Year)	Email Phone
TOM BARTA	Thomas Bacto	City: MADISON W1 Zip: 53704  Street: 720 ASH 5T #3  City: SAVK City Zip: 53583	Town Shok City	)(/15/201_ (Month) (Day) (Year)	Email Phone
James R Biel		of Circulator tify): I reside at 664 Grace 5+		53593	Circ
(Name of Circu sonally circulated this recall petition and personally obtaper with full knowledge of its content on the date indi	stained each of the signatures on this paper. I know that	(Circulator's Residence – Street name and the signers are electors of the jurisdiction or district represented by the sidences given Hamport this recall petition. I am aware that falsifyi	e officeholder named in this petition. I know the	Municipality) that each person signed13(3)(a), Wis. Stats.	

(Month)

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FO		PALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.		Ma
PRINTED NAMES OF ELECTO	RS SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING		СО
Carole VIA	cent Cause Vincent	Street: 221 S. Miduale Blud  City: Madison Zip: 53765	Town Village City  Madison	// /5 20// (Month) (Day) (Year)	Phone (	
2. Dena ubcelk	a Denakbulke	street: 2345. Spring St.	Town Village Co/umbus	// /5/20// (Month) (Day) (Year)	Email Phone	
3. Susan M. Ha	A Sweet M. Glevel	, street: 1425 Fursein Rd - City: Stoughton Wtzip: 63589	Town Village Stoughton	11/15/20_1/ (Month) (Day) (Year)	Email Phone	
4. Jill Benke	it gebenbert	Street: 834 AShwurthor City: Greaph WI zip: 53575	Town No Village City O VECYON		Phone (	
5. Betty Got	h Betty Sor	street: 1305 Delaware Blvd  city: Madison W# zip: 53704	Town Village Pacity Madison	11 /15/2011 (Month) (Day) (Year)	Phone (	)
Susan OB	rien Swar Obnier	street 6614 Futnam Rd city: Madison Wi zip: 53711	Town Village Madeoln	11 // 57/20/11 (Mouth) (Day) (Year)	Phone (	
7. Mark Zanda	- Mach Samba	Street: N6856 Boyd Rd. ChyPardeeville WI Zip. 53954	Town Village Pacific	11 /15/2011 (Month) (Day) (Year)	Email Phone	
8. Carolyn Ar	Hocker Carolin Colarle	Street: 4466 Hillcrest Dr. Apt D William Madison, WI zip: 53705	Town Village Madrson	(Month) (Day) (Year)	Email Phone	
Mesis Weas	Andis Whells	Street: JODD MICGAENY DR  City: MANISCAN WI Zip: 53719	SyrTown City Verona	// 1/5 / 20 //_ (Month) (Day) (Year)	Email Phone	
10. NORMA KAS	MAREX Norma Kasmarel	City: MADISON WI 210:53711	Town Village MADISON	///5/20 (Month) (Day) (Year)	Email Phone	
i, (National Control of the Control	-Billeteld ,	certify): I reside at Circulator's Residence – Street name and that the signers are electors of the jurisdiction or district represented by the cive residences given it support this recall petition. I am aware that falsify	d Number) (Circulator le officeholder named in this petition. I know ting this certification is punishable under S.12.	5 3593  Municipality) that each person signed .13(3)(a), Wis. Stats.		ators,

(Signature of Circulator)

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Marcia M. Smith	Maria M.	Street: 1418 N. WESTFIELD	□ Town □ Village □ City	///5/20// (Month) (Day) (Year)	
Phyllis S. Demmin	Phyllis S	street: 6706 North Ave  City: Middleton zin: 53562	Down Village Nicheleton	// 5/20 <u>//</u> (Month) (Day) (Year)	
Jessica E. Kitto	Jessiev E. Kitte	street: 6504 Theorsant (n # 104)  city: Middleton	Town Village Middle ton	11 /15/2011 (Month) (Day) (Year)	
Wendy Rainford	Wendy Kampos	Street: 1305 Book Falcon Ct.  City: Middleton zip: 53562	Town Village Middleton	////5/20 (Month) (Day) (Year)	
MKHAEL LOMBARD	me	Street: 8540 CASENWRY W.#314 City: MUDICITIN Zip: 5 362	Town Village City MIODLSTON		
Ann Smiley	dun Smiley	Street: 2102 May Flower Dr.  City: Middleton zip: 53562	Town Village Stry Middleto	11 /5/20_// (Month) (Day) (Year)	
Thomas G. Young	Thomas & Youn	Street: 7008 PARK Shares († Jeity: Middleton, W zip: 5356)	Town Village Middlefon	1\ /15/2011 (Month) (Day) (Year)	
SACKL Christian		Street: 9018 aspen Grave Land City: Malion Zip: 53717	□ Town □ Village □ City  Machion	///5/20// (Month) (Day) (Year)	
Julie O'Malloy		street: 4861 HighwoodCir City: Middleton zip: 53562	ATown  Original City  Original City	(Month) (Day) (Year)	
"EDWARD BOSNER	Jan RM	Street: 3706 MANDIMUS G CHy: MISDIMN Zip: WI	Town Village City Milliage	11 /1 720 11 (Month) (Day) (Year)	
Certification of Circulator					
JOHN HUMME	, (cert	tify): I reside at GOIG PTAIR IK D	2 City Mi	<u>CICI 1 K 10 N</u>	

	L-WMa	KASINGIN	2000 V V	<i>&gt;                                    </i>	City: MISTINGTON	zip: V	V City	10 112 100	(Month) (Day) (Year)
	,	1			ion of Circulator		•		
[, _	John 6	4UMM RO	/		, (certify): I reside at <u>6916</u>	Prpirin	E DJ	City MI	ddlkto
	•	(Name of Circu		1	(Circulator)	's Residence – Stree	rt name and Number)		Municipality)
					w that the signers are electors of the jurisdi				
he	paper with full knowledge of i	its content on the date indi	cated opposite his or her nan	e. I know their resp	pective residences given. I support this reca	ll petition. I am aware	that falsifying this certif	fication is punishable under S.12.	.13(3)(a), Wis. Stats.
	11 115	/20 //		ofen	6/m			Page No. (	Official Use Only)
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		, in the second	`			Che Than 1 Town	209	,	

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1. STANLEY H. PROVOLD	Stand & Promote	Street: 7345 CENTURY PL#205 City: MIDDLETON ZID:53562	□ Town □ Village Se City M LDDLETON		Email Phone
2. Doctu Whener	Dorth Weeker	Street: 84 Kessel #4 537517 City:MAd1502 Zip:53717	Town Village Denty Madeson	/ / / 20_/( (Month) (Day) (Year)	Phone (
3. Anthonys	Ant from	Streei:  City: Zip:	□ Town □ Village □ City	(Month) (Day) (Year)	Email Phone
Jayce Ensign	QuedEnsign	Street: 18/10 Camplet Dr City: Madilyon Zip: 53705	□ Town □ Village □ City MACA S ON	(Month) (Day) (Year)	Email Phone
5. Hugh F. Schmidt	Hugh F. Schmill	Street: 1 Veblen Place City: Madison, Wi 21p53705	Town Utillage Maelis W	// /5/20// (Month) (Day) (Year)	Email Phone
6. Nothan B. Knoke	Malo 6. X. Be	Street: 45/4 Stone wood Dr City: Middleton zip: 53562	Trown Willage Middleton	(Month) (Day) (Year)	Email Phone
BARB BOHRINGER	Barbura Gehringer	CHUMAUNAKKKWI ZIDS3597	D'Town City Springfield	11/15/20_11 (Month) (Day) (Year)	Email Phone
8. Edward Shakton	Elyl St	Street: 7007 Namod AVE City: N. dA/cta Zip: 53562	Defown City Malakets	(Month) (Day) (Year)	Email Phone
Howard Gretshein	Howal DISC	Street: 5204 Harbon ct City: Med. 501 zip: 53705	Town Willage Mad SOM	///15/201 (Month) (Day) (Year)	Email Phone
10. Lorragné Schwarz	S. J.	Street: 7781 Elmwood Oust 103 City: middleton zip: 53562	□ Town □ Village □ City  Middletan	11 / 5/20 <u>1/</u> (Mouth) (Day) (Year)	Email Phone
John Humm	Certification (certification)		Do CITY DO	Idd ( Se Ton	Circulat

(Name of Circulator)

I personally circulated this recall petition and personally obtained each of the signatures on this paper it know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. Page No. (Official Use Only) (Signature of Circulator) (Month)

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Ma PRINTED NAMES OF ELECTORS SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE CON Rural address must also include box or fire no (Indicate Town, City, or Villag Scot stroub ☐ Village Phone Email Maria Gudel ☐ Town ☐ Village Phone Email Street: 7781 Flmwood Aus AZM 11 /15/2011 Phone City: MIDDLETON Email Street: 2011 Briske Phone City: Middleton Email 7440 CENTURY AV #5 Phone City: MIDDLETON Email Phone Email 1aywood Ave leodora Smith Phone Email Phone Email Phone Email ☐ Village Phone **Certification of Circulator** KTU / Circulators,

(Circulator's Residence - Street name and Number) I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite bis or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. (Signature of Circulator)

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PO Ma THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. PRINTED NAMES OF ELECTORS SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE DATE OF SIGNING CON Rural address must also include box or fire no (Indicate Town, City, or Village) Email □ Village **⊠**City □ Town □ Village Phone ☐ City Email Phone ☐ City Email ☐ Town Phone City Email Phone Email ☐ Town ☐ Village Phone City C zip: 53704 Email Doty ☐ Town ☐ Village 53703 Phone ☐ City Email ☐ Town ☐ Village Phone **E**€ity Email ☐ Town 15/2011 □ Village Phone ₽ City (606) Certification of Circulator (certify): I reside at Circulators, pl (Name of Circulator) (Circulator's Residence - Street name and Number) I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given, I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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1 Leanne Ania	Leanne Maile	Street: 2309 Prairie Rd. City: Madison, WI zig: 53711	Town See	// \(\sqrt{2011}\) (Month) (Day) (Year)	Email Phone	
2. Tanya Nickel	Garagickel	street: 453 woods icle 53711	Town SW Village MCOLMON	///5/20	Email Phone	
3.	in Off	City: 11 (1) CITY   W   Zip: Street: 5896 BH   SHM	□ Town	(///5/20//	Email	
4.	Marcet taylo	City: //Adi(a) zip: 537// Street: 1115 & Wilson St.	Town TVWALUM	(Month) (Day) (Year)	Phone ( Email	)
MICHAELW.Sch	ME & regression of	\$ 100:50V, WI 53793	ACity TYLKILI DY)	(Month) (Day) (Year)	Phone (Email	
Cherish Pittinan	Cherch Peterman	Street: 2442 allian a Lips 53.71	Town Village City Models	(Month) (Day) (Year)	Phone (	
6.		Street: 9449 Alling Dr. Lot Ja	☐ Town ☐ Village	H / 15/20 H	Email Phone	
7.		City: Zip:	The Kind	(Month) (Day) (Year)	Email	)
Conthing Buter	Jen Alinus Julian	Street: (286 NOVKVICAGE DY City: March Son W = Zip: 63719	Town Village Modum		Phone (	
8. Tennifer E Flows	Senador E Floria	street: 1819 Aberg Ave City: Maduson 2163715	Trown See	(Month) (Day) (Year)	Email Phone	
9.	Sennyar acoug	Street: 2010 Cheapare ar	Town Village Troblem	11/15/2011	Email Phone	
HSYlly bowman	Solly Bouran	ichy: Fitchburg zip33719	City To Cool	(Month) (Day) (Year)	Email	)
Duga Magny	Dane 12 ops	Street: 7818 Park Rige City: Madison zip: 53711	Town Village MODUM	(Month) (Day) (Year)	Phone (	
Sawlan A book	Certification (	of Circulator  (fy): I reside at 4801 WWW.high	Orive, West in	LX 53711		
(Name of Circu		(Circulator's Residence - Street name and	Number) (Circulator M	lunicipality)	Circulate	ors, p

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	1. JonAnne Walters	Jan Walter	Street: 1818 Spaight St. City: Mudison zip: 53704	Town Village WOULD	// /3/20// (Month) (Day) (Year)	Email Phone	)_
	2 Yasash	Kass	Street: 955/ Gromws 81/109	Trown Middletone	) // S/20 (Mouth) (Day) (Year)	Email Phone	
	3 Lorrigher Fe	Merdel	Street: 5990 Schroede (d City: Mpd1500 zip: 63111	Toyn Value (City Made Made Market)	(Month) (Day) (Year)	Email Phone	)
	Derthility	Touth they	City: Madison w = zip: 537/3	Town Wodelow	(Month) (Day) (Year)	Phone (	)_
	Levinder	2 de	Street: 5706 Olang Road City: Madinar, WI zip: 53719	Town Village Mcdeum	// //5/20_/	Phone (	
	a Doeffray ward	C. W.	Street: 366 N B 766 K53715 City: Mad, S6N W I zip: 53715	Town Series Modern	/// / \$\frac{1}{20} \frac{1}{(Month) (Day) (Year)}	Phone (	<del>,</del> )
	" Sarah Coombs	5, C.	Street: 1116, E. Johnson Apt, 1.  City: Madison WI zip: 53763	Town See	$\frac{11/5}{1000} = \frac{15}{1000} $	Email Phone	
	Phillip Powells.	Miligi Robe.	Street: 2001 ReetzBC  City: Madison zip: 537/1	Town Say	11 /15/20 11 (Month) (Day) (Year)	Phone (	<u>wr</u>
	Shithi Camps	Sman	Street: 211 & A11261 arts  City: W. (2) ( 2ip: 5) 11	Town See)  City Moderan		Email Phone	
	MicHAL SONFORD	1 Itabel & Sergen	Street: 826 FAIRMONT BUT City: NUCLSM Zip: 53711	Town Sw Su City Mades	1 /5 /20 <u>(Month) (Day)</u> (Year)	Phone (	)
I, _	Sougha A Ldon		ify): I reside at 4801 WEDD BULL	Ouc Mastio	n he 5371	/ Circula	atore
I pe	(Name of Circul resonally circulated this recall petition and personally obtated the paper with full knowledge of its content on the date indicate	ined each of the signatures on this paper, I know that t	(Circulator's Residence — Street name and the signers are electors of the jurisdiction or district represented by the residences given. I support this recall petition. I am aware that falsifyi	officeholder named in this petition. I know the	hat each person signed	Ph	hone

(Signature of Circulator)

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1. Melvin Walls	Melin Walls	Street: 2309 Cypress way #4	Town Woodboon	11   15   20 <u>11</u> (Month) (Day) (Year)	Email Phone
CARESSA LAURITZ	Caussa Januts	Street: 630/ hammeasley fcl.  City: Machson 219:537//	Town Washington	///5/20// (Month) (Day) (Year)	Phone Z40)
Robert Bingham	Tolet Bin	Street: 3037 Maple Valley Dr *101  City: Madison Zip: 53719	Town Village City	11 /15 /2011 (Mouth) (Day) (Year)	Email UNWWWW Phone
Kryste Weisheit	KJerja Wersh	street: NE987 Od Madiorn Rd  City: New Glarus zip: 5357#	Town New Gens	/15/2011 (Month) (Day) (Year)	Email Phone ( )
MARENZRA SINNA	N.M. Sinhe	Street: 12 Falmults 17-	Unillage Modeson	// /5/20// (Month) (Day) (Year)	Email Phone ( )
John Forn	John of Fair	Street: 57 18 BA/SAM RP City: MAd you zin 53'711	Town Village Woods	(Month) (Day) (Year)	Email Phone
Vanita Green	Vanita Green	Street: 2413 Parker Phee City: Madison : 21p. 53713	Village WWWWW	11 /15/20 <u>11</u> (Month) (Day) (Year)	Phone ( )
8. Teldy Aleraha	Asses	Street: 1517 Ridge Oak or City: Madison zip: 63704	Town SW Village Village MCity WQQ W	(( /15/20	Phone ( )
o. Gragg Gill	Days Jama Diss	Street: 833 Kottka 53719  City: Zip:	Town Village Wedush	11/1720 <u>11</u> (Month) (Day) (Year)	Phone ( )
Donald Woolfn	wind a Winest	Street: 4801 WOOTSUTT DR  City: MADISON WT Zip: 52711	Town Se Village World LESON	(Month) (Day) (Year)	Email Phone ( )
Sandra A Levote (Name of Circu			Liter Ado  IN USA  (Circulator N	(J) L 537	Circulators, pl

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1.	() 11 p	street/937 Manthpart D	Town Village	1/ 1/5/2011	Email				
ANN Harden	Una Haden	City: Zip:	City V Call (NY)	(Month) (Day) (Year)	( )				
2. 1/ 1/	The same of the sa	Street: 437 NO10 h PO17 D1	Town Village Model and a	11 /15/2011	Email Phone				
Jaquan Flomins	Sasin	City: Zip:	Pi City TICOUM	(Month) (Day) (Year)	( )-				
3. T. (T)		Street 5134 Church, 11210	Town Village M. Ado A.	11/15/2011	Email				
Jet Ellingson	Adril-	City: Middle TON WIZIPE 53 5	Scity Waldelon	(Month) (Day) (Year)	Phone ( )				
4. Keel Million	1 2 MAG	Street: 7032 Old Sauk Rd	Town Village A A A A A	11 /15/20/1	Email				
100110100	Rant & Miller	City: Madison WI zip: 53717	- Willage Madeson	(Month) (Day) (Year)	Phone (GCS)				
5.	7 1 1 2	Street 53 JJ WESTPORT RD#108	□ Town □ Village (\( \lambda \) \( \lambda \) \( \lambda \)	15/20[]	Email				
KUTH ALFARO	Front Alfaco	City: MADISON W/ Zip: 53/04	Decity VILLIAN	(Month) (Day) (Year)	Phone ( )				
6.	10 21	Street: 1115 EDGETILL SP	□ Town Sw	11/15/2021	Email				
NATHAN JONES	11.5	City: MADISON Zip: 53705	Holis Walism	(Month) (Day) (Year)	Phone ( )				
7.10:11.10	Mail Da	Street: W. PINSKA	Town Sw	1/5/2011	Email				
LUSVULY KATIN	Whan	City: AVUM 1 zip: 53503	City City	(Month) (Day) (Year)	Phone ( )				
8. TERRS I FRUE -	a le	Street: 2111 ROSENBERRY RO#1	' □ Town SW	1 /15/2011	Email				
100 0 CIPCIO	1	City: MADISON Zip: 537//	D Village City MAO1500	(Month) (Day) (Year)	Phone ( )				
9.		Street: State N Wallardge Pre	1 × 2	11/15/2011	Email				
Kimberly Olsin	Kustaly Oprof	city: Madison o zip. 53714	City Grove	(Month) (Day) (Year)	Phone				
10.	r/1//	Street: 539 Donofrio DR 45	Town Sco	11/5/201	Email				
Any Uh	1 Section	Civ. Madean WI zip 53719	City Waleson	(Month) (Day) (Year)	Phone ( )				
	Certification	of Circulator	Litual	<u> </u>					
Specification of Circulator (Certification of Circulator (No. 1) (No.									

(Name of Circulator)

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(Circulator's Residence - Street name and Number)

Phone (

(Circulator Municipality)

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(Circulator's Residence - Street name and Number)

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CON
1. Lee Sullivan	Lee Sullivan	Street: 1206 Sweeney Dr. #5  City: Middleton Zip: 53562	Town Sell Stay	// //5/20// (Month) (Day) (Year)	Email Phone
2. Thomas Bernstein	Thomas Blocker	Street: 9 Lampeta Cir City: Mad 36 n zip: 52711	Town Updage Tokity Maduson	11 /15/20_11 (Month) (Day) (Year)	Email Phone
Brielle Cranfield	BAO	Street: 3021 Darts Dr. Apt  City: Madisson Zip: 53714	Town SW Sily Middle Willage Middle W		Email Phone ( )
Laxeitha Sanyano	Raketha Songra	Street: 1128 Morraine Usew 2+203 City: Mad 15011 zip: 535719	Town Willage Madison	/ S/20[] (Month) (Day) (Year)	Email Phone
James Crahan	Jone J. Lupur	Street: 6765 Schnoder 53711 City: Zip:	Town SW SW City Medium	//5/20/1 (Month) (Day) (Year)	Email Phone
Tito Doss	the Cim	Street: 11 X Marking View Mr 203  City: Madison Zip: 53719	Town Showillage Milabon	11 //5 /20 <u>//</u> (Month) (Day) (Year)	Email Phone
5 and Workston	Sudra Jacobson	Street 4801 WEDOLDWA LA CHYMALIAN WE ZIP 53711	Town Sulling City Maleury	(	Phone ( )
8. Jerry Alexander	Sonstaling	Street: 2028 Marson 5-1 City: Madison 1413 21953705	Town SW Village MDOLUSY	//////////////////////////////////////	Phone ( )
"Regina Rhune		Street 2619 Mc Div, H Rd, #5	Town See Village Mades DV	///S/20// (Month) (Day) (Year)	Email Phone
FAICTIE STEDS /	norte Sten	Street: 1807 REETZ RD  City: MADISON 210:53711	Town Village Madum	// // 5/20_/1 (Month) (Day) (Year)	Email Phone
Sould Adapte	Certification (cert		ine The SN	(LET)	Circulators, pla

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(Day) (Year)

(Name of Circulator)

(Circulator Municipality)

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1. Dustin Dean	1 post b	street: 725 Miami Pass	Town Village City  Madism	11/15/2011	Email Phone
2		city: Madison zip: WI	· ·	(Month) (Day) (Year)	Email,
Paul E. Pingrey	D. OSP.	Street: 625 North Segoz Ra#608	Town Uvillage RCity  ATSEN	11 /15/2011	Phone
Paul E. Pingrey	1 aul 2, linguer	city: Madison, W/ zip. 53705	Meny (122(1)81)	(Month) (Day) (Year)	Email (
Karen B. Atz	The BU	Street: 625 N. Seque Ry #608	Town Village Addison	///5/20_// (Month) (Day) (Year)	Phone
4.		City: //00/1504 W/ zip: 53705	Town		Email
as Rumootto Porter	Osammo Ha Partsac	Street: PO BOX 152  City: Paymette W1 zip: 53855	□ City Port	(Month) (Day) (Year)	Phone
5.	/ marchante / march	Street: 275 Walnut St	□ Town	11/15/2011	Email
Rachel Mikkelson	Rachel Mikhelm	City: 6 regon zip: 53575	Sa Village Ore GON  City	///25/20// (Month) (Day) (Year)	Phone
6.		Street: 5529 GETTLE AVE	□ Town	11 /1-/2011	Email
NATE SMITH	NX	City: MAD150N WF Zip: 53705	Willage MD/SON	(Month) (Day) (Year)	Phone
7.	100	Street: 4601 To Kay Bl	Town	11/15/20/1	Email
Margaret DISON	Margaret OfSon	City: Madison, WI zip: 537/1	Village Mad ISON	(Month) (Day) (Year)	Phone
8.		Street: 31 EM CT.	Town	1/ /15/20//	Email
Mary Kampa	Mary Kampa	City: Sprogram zip: 54801	Dillage Spooner	(Month) (Day) (Year)	Phone
9. / / / / /		street: 1101 SNEXMAN AVE	□ Town □ Village	11/15/2011	Email
Mishan Searles	moralsearles	City: Madison zip: 53703	Acity Maduson	(Month) (Day) (Year)	Phone
Bill Checovich	1, (90)	Street: 533 Clifden Dr.	Town Village Mad 1500	11/15/2011	Email
13111 CHECOVICA		city: Madison zip: 53711	City IVIAC (SOV)	(Month) (Day) (Year)	Phone
	Certification	of Circulator	city,0	F	
S/even F		ify): I reside at <u>584 N, M, Jvale Blu</u>			Circ
(Name of Circui	lator)	(Circulator's Residence – Street name and	d Number) (Circulator I	Municipality)	211 0

(Signature of Circulator)

Page No. (Official Use Only)
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1. Kistina Vaccaro	Hostora Valgado	Street: AROO CYCY RCI City: DEGOYEST Zip: CRY	Patrown Village W/Nd Sor Ital	(Month) (Day) (Year)	Email Phone		
CHERYL DUERST	Cheryl Durat	Street: 2782 BERKAN ST City: MADISON Zip: 53711	Town DUNN ☐ Village ☐ City	///5/20	Email Phone		
Becky Soderholm	Beeky Sodesholm	street: 341 Meadow Crest Tr1  City: Cottage Grove zip: 53527	Town Pillage CoHage Evove	(Month) (Day) (Year)	Phone (		
Tom HEBL	Tom HzBL	Street: 306 Windson St. City: SUN PRATRIE Zip: 53590	Town Village SUN RAIRIE	// //5/20] (Month) (Day) (Year)	Phone (		
Patricia ( Heb)	Patric Hell	street-306 Windson St city: Sun Prairie W zip: 53590	Town O'village D'City Sun Prairie	// /5/20](Month) (Day) (Year)	Phone (		
Jenny Harron	Jeung Ham	street: 2 Provo Ct  City: Madison zip: 53719	□ Town □ Village ☑ City Madsow	(Month) (Day) (Year)	Phone (		
7. Allison Maida	Alison maida	street: 5001 Barton RQ  City: Madison zip: 53711	Town Uvillage RCity  MCdulSon	(Month) (Day) (Year)	Email Phone		
8. Marla Gamoran	marles Jan	street: 317 (KYPNNE Trail city/Madrison zip: 53705	□ Town □ Village □ City  Market Market Say	(Month) (Day) (Year)	Email Phone		
JoAnne E Meitner	J. anse Freiher	street: 372 Canal Rd. city: Marshall, Wi. zip: 53559	Drillage City Jourship	(Month) (Day) (Year)	Phone		
Peter A Wests	Retora Wess	Street: 8470 P.Mnocle 2d  city: Barneveld zip: 53507	Town O Village ATCA C	/t5/20 <u>1(</u> (Month) (Day) (Year)	Email Phone		
STOWN E. S	Certification	of Circulator	city of		<u>1</u>		

(certify): I reside at 5 0 7 /V, Pt, augle D/ud 1/9d/50N (Circulator's Residence – Street name and Number) (Name of Circulator) (Circulator Municipality) I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their repetive residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

(Signature of Circulator) (Month) (Day) (Year)

Circulators,

Phone

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1. STeven Siehr	Mere Fheir	Street: 584 N. Midvale Blud  City: Madison zip: 53705	Town Village KCity  Madison	///3/20// (Month) (Day) (Year)	Email Phone
Brook Richardson	But Mpin	street: 4917 Shabiyon Are Apt 65  City: Mach 500 zip: 53705	Town Village He City Med 1501	11 /15/20 <u>i/</u> (Month) (Day) (Year)	Email Phone
3. Matthew Brelie	Letteren Bell	street: 3702 Sussex Lane City: Madison WI zip: 53714	Town Village Scity Nachscin	il /15/2011 (Month) (Day) (Year)	Email Phone
4. RICHARD KURTH	Tichard Kurth	Street: 10126 CTYRDY City: MAZOMANTE, WI Zip. 53560	tr'Town Uvillage CirnazonaniE	// //5/20 <u>//</u> (Month) (Day) (Year)	Email Phone
John Heredia	Hiller	street: 4829 She boygan Ave 29 city: Mad son zip: 53705	Town Village Mad Soy	// //5/20 <u>[ (</u> (Month) (Day) (Year)	Email Phone
Athena Heredia	Alady	street: 4829 Sheboygan Aug 200 City: Madison zip: 53705			Email Phone
1. Tim Richards	Ti Pa	Street: 502 DIVING HALK  City: Madison zip: 537B	Town Village Madison	/ / // 20 <u>//</u> (Month) (Day) (Year)	Email Phone
8. Karl Lavine	1/W Livi	Street: 110 Green Lyler Pass City: Mydism NI zip: 53705	Town Village Getty Mad'4M	1) /15/2011 (Month) (Day) (Year)	Phone -
. Shanan Dean	Annim Daan	Street: 725 Miami Pass  City: Maclism WI zip: 53711	Town Village Mullism	// //5/20// (Month) (Day) (Year)	Phone (
HEATHER KIRKPATRICK	Heigher Hill	Street 207 DIVISION ST. City: PROKLYN Zip: 53521	Town Phockly No City	)   15   20   (Month) (Day) (Year)	Email Phone
STEVEN F.			<del></del>	SON Municipality)	Circulato
		the signers are electors of the jurisdiction or district represented by the			- Phor

the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

(Signature of Circulator)

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Mari Fleet White	Man Flet White	street: 401 N. Meadon Lane City: Madison, Wl zip. 53705	Town Village Madison		Email Phone
2. Beign BENGRY	Ri Bengr	Street: 344 SCOTT RD  City: MoJUT Horeb zip: 53572	□ Town  Sillage Mont Horeb  City	11 /15/2011 (Month) (Day) (Year)	Phone (
J. J. Gossens	July and	Street: 1602 Blackward Ct	Town Village Village Village Village	11/15/20 <u>11</u> (Month) (Day) (Year)	Phone (
Dorothy A. Otting	Dorothy a Othing	street: 250-7 Indian Mound Pky  City: White water zip: 53140	Town Uillage Water	// /15 /20 <u>//</u> (Month) (Day) (Year)	Phone (
Roynoth Offine	Honor Othy	Street: 250-7 Indian Mound PRZ cityle hita water zip. 93/90	Town Village Witton of CV	1 / / 5 7 20 // (Month) (Day) (Year)	Phone (
Bobbi Snethen	asmy)	Street: 3/1 FOVEST GT 2B  City: Madigan zip: 53726	Town Village City Mad Son		Phone (
SHARON BENZMILLE	MAR	Street: 10 WESTBLOOK CIRCLE City: MAOKON Zip: 53 711	Town Village MAD ISON	(Month) (Day) (Year)	Phone (
8. Tyles Hansen		Street: 5837 Serlet Dr City: Par Fitchburg zip: 53711	Town Village Fitchburg	11 /15/2011 (Month) (Day) (Year)	Phone (
afina MCAliste	Catha Malte	Street: 4 Ledo Fray St City: Madis M Zip: 53708	Town Village MacUSM	(Month) (Day) (Year)	Phone (
10. Alma Trevino Thomas	Car On	street: 1014 E Johnson # Apt   city: Madison zip:53703	Town Utilage ECity  Wadison	(Month) (Day) (Year)	Phone (
STEVEN F. S		of Circulator  ify): I reside at 584 N, M. Jug/e	Blud Madis	city of	_

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(Name of Circulator)

(Month)

(Circulator's Residence - Street name and Number)

Circulators, Phone

(Circulator Municipality)

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Elizabelké Noë L	Elizabeth E. Nools	Street: 200 NYGARDST,	Town   Village   Mad   Son	(//5/20]( (Month) (Day) (Year)	Email Phone
Sceone Gard	Elijobeth 2. Noels Aces Sul	City: Mad 1 SON Zip: \$53713  Street: 263 E Man St  City: EVanSNIU W zip: 53534	Town Unillage evansulo	/5/2011 (Month) (Day) (Year)	Email
		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)	Email Phone
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		Street: City: Zip:	☐ Town ☐ Village ☐ City	//20(Month) (Day) (Year)	Email Phone
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•		Street:  City: Zip:	□ Town □ Village □ City	/ /20 (Month) (Day) (Year)	Email

4.		_		□ Town		1 1	Email
		Street:		☐ Village		/ /20	Phone
		City:	Zip:	☐ City		(Month) (Day) (Year)	
5.				□ Town		1 1	Email
		Street:		- □ Village		/ /20	
		lan.	71	☐ City		(Month) (Day) (Year)	Phone
6.		City:	Zip:				Email
<b>0.</b>		Street:		☐ Town ☐ Village		/ /20	
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7.		Street:		☐ Town		/ /20	Eman
		Situati		☐ Village ☐ City		/ /20 (Month) (Day) (Year)	Phone
		City:	Zip:	LI CRY		(Month) (Day) (Year)	
8.				□ Town		1 1	Email
		Street:	<del></del>	□ Village		/ /20	Phone
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	Certification	of Circulator	1.4.	. 0		Town of	-11
Kathy Wolf	, (ce	rtify): I reside at 493	1 Hickory	Trail	madies	on Springti	ed
(Name of Circul	ator)	(Circulator's	Residence – Street name d	ıd Number)	(Circulator M	Iunicipality) 🔪 🗸	Circulators,
personally circulated this recall petition and personally obta he paper with full knowledge of its content on the date indic	tined each of the signatures on this paper. I know that	at the signers are electors of the jurisdicti	ion or district represented by the	e officeholder named in the	is petition. I know th	at each person signed	1 110110
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Surolle iner	Shaklemere	Street: # 3 D'enflo O(#3  City: New disc zip: 53719	Town Village City  Town	/ // /5/20 (Month) (Day) (Year)	Email Phone
Emily Schendel		street: 507 S. Baldwin St #1 City: MacUSon zip: 53703	Town Village MOOUSEN	(Month) (Day) (Year)	Email Phone
bri gamblain	Bugambfain	street: 1/57 petra p/ #5  City: Mad ison zip: 53713	Town Village Docity Madison	// //5/20// (Month) (Day) (Year)	Email Phone
Nathan Cooke	Nather Cooks	Street: 5267 Lacy Rd City: Fitchbirg zip: 53711	Town Village Fitchburg	11 //5/20/1 (Month) (Day) (Year)	Email Phone
Donothy Valenti	Doga Vichnotin	city: Ucunalizer zip: 53597	Town Stillage Wa Unaker	///5/20_1/ (Month) (Day) (Year)	Email  V Ci  Phone
Donna Nowakowski	Donna Jowa Rowski	Street: 5002 Black Valuet &	Bvillage McFarland	11 /16 2011 (Month) (Day) (Year)	Email Phone
•	Ulishin Lum	Street: 6 Magnolia Circle City: Madison, WI 5.37/3 Zip:	Town Village Madison	// //5/20_//_ (Month) (Day) (Year)	Email Phone
Nelissa Baraboo	Welissa J Barabio	Street: 832 5 4th Street City: Stoughton, WI zip: 53589	Town Village Stoughton	// /15/20 <u>//</u> (Month) (Day) (Year)	Email Phone
. Ryan Apodocop	Ba	Street: 405 EUGENIA AVENUE AFTAN	WCity MADISON	11 / 15/2011 (Month) (Day) (Year)	Email Phone
. Kim Cherrier	Kun C	Street: 2012 Greenway (noss#	Hown Pachburg	(Month) (Day) (Year)	Email Phone
Kathu Wolf	Certification (certification)	of Circulator  ify): I reside at   (Circulator's Residence - Street name and		Town of Springfield	√ Circu

(Circulator's Residence – Street name and Number)

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Tammy Rechtige   Marting   Phone   Phone   Street   Schulbe   Street   Schulbe   Street   Str	,	onstitution and S.9.10 of the Wisconsin Stati	LITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	NICIPALITY OF RESIDENCE MUST ALWAYS	S BE LISTED.	
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Tennifer Mayland Samply 2 Marks 2 158 1 Manscript 1 Williams 2 158 1 Mayleng 2 158 2 1 Mayleng 2 1 May	DANILLE O'TALUI	1111	City: M A0150N zip: 53703	ACity M ADISIN		(
Jenn ter Marken Jenny Mokey  3. Denise Marken Demice Marking Con Fitchburg  3. Sund 5758 Will Daws Dring Uta Driver  11/1/2/2011  3. Sund 5758 Will Daws Dring Uta Driver  11/1/2/2011  3. Sund 174 Moreine View Drives 367  11/1/5/2011  4. Sund 577  11/1/5/2011  11/1/	2.		Street: 5758 Williamsbys	□ Town □ Village	11/15/2011	
Denise Marken Denide Marking Coff ; the bure 20 5379 Coff it (h bure ) Common (how ) C	JenniferMadan	Jenny L. Markey	1 (1)	DCCity 1		(
Jense Marken Double Careful Company of the bours in the bours of the b	3.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	□Town	11/11/2011	Email
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Ammy Rechtige Marker Wings Madism (as) Mand (as) Tend (as) To the Schultze Marker Wings Madism (based) (as) Tend (based)	4.			□ Town	li listani	Email
5. Jay ce Schultze Mer Schulbe MT Horeb Willings MT Horeb (Stand) (One)	Tomas Rechtrical	Allow A	43719			Phone
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Town	I'M Schlenkert		Street: 10 Spring wood Gr 537/7	Village Tourson		Phone
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8. Elizabeth Corint Cl. Les Street (6800 Schroder D #15   Town Village Schroder D #15   Town Village Schroder D #15   Town Village Schroder D #15   Phone (Month) (Day) (Year)   Phone (Circulator Street D & St	lil. 1. AA			☐ Village	11 / 15/2011	
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Street: (35 Hercules Trail   Town   Village	Elizabeth Lount	(CD) 1	street 6806 Schrower WMS	□ Town □ Village 🔥 🔪	11/5/2011	
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Street: 606 Center Street Town Village Pearson City Madison Zip: 537/3 City Madison Month) (Day) (Year) Phone (Corculator Frank of Circulator) (Circulator's Residence - Street name and Number) (Circulator Municipality) For Circulator Street Now that each person signed ersonally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed	Sarah Dovotny	Gul brothy		N/City AA		((
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S 9 10 of the Wisconsin Statutes

		TY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUN	ICIFALITI OF RESIDENCE MOST ALWAT	S BE LISTED.	
PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	
1. Judith Sikora	Judith Sekra	Street: 584 N. Midvale Blud City: Madison zip: 53705	□ Town □ Village  IN City Malison	///5/20 <u>//</u> (Month) (Day) (Year)	Email Phone
Julil Zachen	Julio Zar	Street: 9 5. Hills; Le Tel	Town Uvillage City Wad Son	/1//5/20 <u>ff</u> (Month) (Day) (Year)	Email Phone
Steve Royalton	the Royalton	Street: 202 N. Whitney Way City: Madison Zip: \$3705	Town Village Madison	11 /15/20 <u>11</u> (Month) (Day) (Year)	Email Phone
Darren Schoer	Sam Am	Street: 509 S. Onen Dr.  City: Madison, WI zip: \$33711	Town Village Med 1501	11/15/2011 (Month) (Day) (Year)	Phone (
Barry Steiglitz	Bony Mr. Alys	Street: 4701 Sheboygan Ave. Apt. 101  City: Madison, WI zip: 53705	Town Village Mad(500	11 /15/20 11 (Month) (Day) (Year)	Email Phone
LUNSHOND PA JONES	I HEAD	City: Madison, WI Zip: 53705 Street: MADISON VII 5371  City: Zip:	Town Village MADISON	(Month) (Day) (Year)	Email Phone
David Stamsta	Daw Hos	city: WAUNTER WI Zip: 5-35-97	Town Brillage WAUNAITEC	1/ /15/20 <u>//</u> (Month) (Day) (Year)	Email Phone
8. MARJORIE HAMALHEN	Mayorie Namachor	Street: 301 S. Midrale Blvd.  City: Madison zip: 53705	□ Town □ Village  PCity MAPISON	// 15/20// (Month) (Day) (Year)	Email Phone
Jack W. Cipperly	Joet W. Cignery	Street: M& 27/5 or 539// City: M& 2(50 n) zip: 539//	Town Village MAD150 N	12 /15 /20// (Month) (Day) (Year)	Email Phone
Sandra Gassens	Landa Sassen	street: 1602 Black wood Ct City: Middleton zip: 53562	Town Village Section Middleton	11 /15/20// (Month) (Day) (Year)	Email Phone
Judith Sikora	Certification (		City	of	

(Name of Circulator) (Circulator's Residence – Street name and Number) (Circulator Municipality) I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their regrective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. (Signature of Circulator)

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

THE MUNICIPALITY USED FOR MAILING	PURPOSES, WHEN DIFFERENT THAN MUNICIPALI		ICIPALITY OF RESIDENCE MUST ALWAYS	BE LISTED.	]
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1. Cory Geisler	CA	street: 205 OakTree Ct city: Mt. Horeb zip: 53572	Town Mt. Horeb		Email Phone
2. James Dietrich	James Withich	street: 212 Grand Camon Dr.  City: Madison zipz 33705	Town Village Madison	///5/20 <u>//</u> (Month) (Day) (Year)	Email Phone
3. Cheryl Malx	Chary May	Street: GI SAWYEN TET City: Madison zip: 5370	Town Willage MadiSon	Month) (Day) (Year)	Email Phone
4. LINDA CUNNINGHAM	Sudeflumin whom	Street: 6226 OLD MIDDLETONRD City: MADISON WI Zip: 53705	Town Wallage Wallson	11 / 15 / 20 1/ (Month) (Day) (Year)	Email Phone
5. KATHLEEN SCHELL	Daiblee Sheel	Street: 157 NAUTILUS DR City: MADISON zip: 53765	Town Village City  Town	( // 5/20/( (Month) (Day) (Year)	Email Phone
Gysan Raddiffe	Symhadelfihe	Street: 710 Moyace va Ro City: Monona zip: 537/6	Town Village Onona	////5/20// (Month) (Day) (Year)	Email Phone
Khister NAmdi	Mister and.	Street: 1825 Lucker ME#116 City: C1888 Plans zip: 53528	Town Village OST Dins	(Month) (Day) (Year)	Email Phone
Jud M. Roller	ANKOAL	Street: 8852 Blynn LA City MAWMWW zip: 53560	□ Town □ Village □ City	11 /15/20 <u>/(</u> (Month) (Day) (Year)	Email Phone
9. STANISLAW SZAWICA	Jan .	GIVE MADISON WI ZIP. 53705	□ Town □ Village  A,City MADISO W	//5/2011 (Month) (Day) (Year)	Email Phone
10. JADWIGA SZAWICA	Medya Sowan	Street: 602 SANYER TER 720 City: MADY SON. Zip: 53705	Town Village 19 ADI SOIV.	1/ /5 /20 /	Email Phone
Judith Sikora	Certification of	of Circulator	City or		
(Name of Circul		fy): I reside at <u>584 N. Midvale Blvd</u> (Circulator's Residence – Street name and			Circ <u>ulator</u>

the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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Diane Friedericks	Dean Frederick	Street: 177 Cadar Aug City: Brodhad zip: W/53520	Town Village City  City	// /5/20// (Month) (Day) (Year)	Email
ELL ENAPPLEDORN	Ellen Appledun	Street: 310 Co Mally City: Walnakee Zip: 53597	Town Village Warmaket	///5/20// (Month) (Day) (Year)	Email Phone
Cara Bostad	(au)	Street: 313 Sauk Creele Dr. City: Madison WI zip: 53717	Town Village City Madragy	1 / 5/2011 (Month) (Day) (Year)	Email Phone
Jack Gard	(al)	Street: 263 E. Main St City: Evansville Zip: 53536	Town Village Vausoulle	// //5 <sup>-</sup> /20_//	Phore
Ryan Ellerbeller	Rywelles	Street: 3726 (owntry brove or City: Madiso N 53719kip: WI	Town Village Madyan	(Month) (Day) (Year)	Phone
Judy Day	July Day	City Overn 5355 Zip: Circle	Stillage Oregund	(Month) (Day) (Year)	Phone
STEPHEN BARABOC	An	Street: 832 5 4+4 ST  City: STOUGHTON Zip: 53579	Town Village STOUGHTON	// 5/2011 (Month) (Day) (Year)	Phone
Lisa Patterson -	743	Street: S40 Troy DK City: Madison Zip: S3704	Town Village Maelson	////5/20 <u>11</u> (Month) (Day) (Year)	Phone
Saxoline Clark	Vastine Clark	Street: H334 Allarest Punh	Town Village City  Madison	/ / / 2011 (Month) (Day) (Year)	Phone
Mike Clark	Mik Clark	Street: 4336 Hellerest Civ. City: Modern W 7 Zip: 53785	Town Village March Scrip	(Month) (Day) (Year)	Phone
Chan Husse	Certification (	of Circulator ify): I reside at 6409 Bridge Ro	of the Mode	19 - W/ 5	3712

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Walter Donald	water Concell Schuttze	street: 134 Jennifer Circle	Town Styllage Mt Horol H	11 /15/2011 (Month) (Day) (Year)	Email School			
Schultze 2. Megan Goe	Megan Cae	city: Mount Hove 6 zip.53572 Street: 2817 Curry Parkway, #14	□ Town □ Village    Village		Email Phone			
3.		city: Madison zip: 53713 street: 7502 Westwadway 207	City Wallsh	(Month) (Day) (Year)	Email			
Jane Marie Christian	ane Maichist:	city: Mald ison 53717 zip: (1)	Village Madison	// /5/20// (Month) (Day) (Year)	Phone (608			
Bianca Bolden	BY	City: Madison zip: 53719	O Town O Village Dicity  Maddon	// 15/20// (Month) (Day) (Year)	Phone (608			
5. Joshun Skinner	Josephine	Street: 5578 Whalen RU City: Fitchburg, WI zip: 53575	Town Village Achburg H	1) / 15/20// (Month) (Day) (Year)	Phone			
Meegan Carpenter	my	Street: 5020 Hardy Tr City: Waynakee zip: 53597	Town Westport Village City	///5/20 <u>//</u> (Month) (Day) (Year)	Email Phone			
Ethel Albertie		Street: 2020 FigHer 3t5 37/7	Town Village Madison //	1/1-720_11 (Month) (Day) (Year)	Email Phone			
8. Cody Hosslinger	God Harn	Street: 223 cedar dr City: Oregon zip:53575	vijilge O rego nil		Email			
" Natalie Gordon	notalie Gordon	street: 1912 atwoodAve  City: Madison zip: 53704	Town Village Madison	11/15/2011 (Month) (Day) (Year)	Email Phone			
Taylor Powell	dryh Poull	street: 450 East Richards Rd	Town Village City  City	11 /15/2011 (Month) (Day) (Year)	Email			
Jelling Huss	Certification	of Circulator ify): I reside at 6409 Budge Read	Hoz Madison	53713	Circulators			

109.01 Vallett anyth	City: OreaOn	zip: 63575 City	(Month) (Day) (Year)
Illian Hussey	Certification of Circulator (certify): I reside at 6409	Bridge Read, #102	Madison 537/3
(Name of Circulator) sonally circulated this recall petition and personally obtained each of the sig	Circulalor' matures on this paper. I know that the signers are electors of the jurisdi	s Residend – Street name and Number) ction or district represented by the officeholder	(Circulator Municipality)  named in this petition. I know that each person signed
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII. Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

PO Ma THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE DATE OF SIGNING CON PRINTED NAMES OF ELECTORS SIGNATURES OF ELECTORS Rural address must also include box or fire no. (Indicate Town, City, or Village) Email ☐ Village Phone City Email ☐ Town Phone Email □ Town ☐ Village Phone City Email ☐ Town □ Village

City Phone Email ☐ Town □ Village City Phone Email ☐ Town ☐ Village Phone City Email ☐ Town ☐ Village Phone DL City Email ☐ Town ☐ Village Phone City Email ☐ Town ☐ Village Email ☐ Town ☐ Village Phone ☐ City (Month) (Day) **Certification of Circulator** Circulators, pl (Circulator's Residence – Street name and Number)

(Month)

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(Circulator Municipality) I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective respective respective respective free lences give has perfectly respective. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats. (Signature of Circulator

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1. Lucy Gallardo	Lucy Holarla	street: 495 Kelvington IV.  City: Sun Prairie zip: 53990	Town Offy of Pairie Main C	Email    Control (Day) (Yeár)   Phone
JOHN TALLES	John allen	Street: 7 RED OAKTARI-	Town City pt Willage Madison Mam	// / /5 20 // Phone Phone
Clarranne Kotenbeu	tel Claume Kolensen	Street: 302 OKITELD RA  Street: Madisin zip: 53717	Town City of Millage Mudison main	// //5/20//   Email   Phone
4 Michael J Packinson	Much of phre	Street: 7531 Fallen Care Da	Town City of Main City of Waln	Month) (Day) (Year) Email Phone
5 Virginia L. JENSEN	Jugura Janoba	1-22-21 at 11/1/PI	Town dity of Man City of Man	Month) (Day) (Year) Email Phone
6. MYRNA CASEBOLT	Type Cospect	Street: 7434 CEDAN EREKTRL  City: MADISO D Zip: 53717	Town City of My Ocity Of My Ocity Machine	// //5/20//   Email   Phone
"Martin J Malloy	Mark Mass	Street: 13 Springwood Circle City: Madison zip: 53117	Town Oty of May City Made Madison	
8. MARY L Stewar	Mary L. Stewart	Street: & White Pine Tr City: Madelon W1 zip:53717	Urown City of Man City of Man City Mad ISON	Month) (Day) (Year) Email Phone
Donn D'Alas	& Dalessia	Street: 46 Oak Creek TV1 City: Medeson WI zip: 53717	Town Clty of Man City Man Madison	Month) (Day) (Year) Email Phone
10. JULIE HAYWAR	Inlie Hogward	Street: 46 OAK CREEK City: WAD DISON Zip: 53717	Town City, of Main Village MOLD ISON	Mouth) (Day) (Year) Email Phone (6)
Mary Anne	Mayheu Certification		r. Madison	Circulo

Phone
Email

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James Maylew	Las Maylund	Street: 7423 Codan Crook Trl City: Majson zis:53717	Town City of Man City Nacity Nacity	1 /   S / 20 11 (Month) (Day) (Year)	Email Phone			
2 Mary Anne Mayhen	May Come thay how	Street: 7423 Codar Creek Tr. City: Madison zip: 53717	Town City of Man String Madison	11/15/2011 (Month) (Day) (Year)	Phone ( )			
3. Wary Genovee	Many Genouse	Street: 4 Alef Ocher 537/7 City: 2Ku zip:	Drown City of Mam Ocity Madison	///5/20 Î   (Month) (Day) (Year)	Phone ( )			
Joan Schaefer	Jun Lchaefer	street: 21 Sugar Maple Trl  City: Madison zip: 53717	Drown City of MOM  Willage MODISON	// //5/20 <u>[/</u> (Month) (Day) (Year)	Phone ( )			
5. GLEN R. KLOTZ	Slew R. Klot	Street: 201 S. Westfield Rd.  City: Madison WI zip: 53717	Drown City of Man	// /5/20// (Month) (Day) (Year)	Phone ( )			
Carolyn M. Klotz	Carolyn M. Ktoly	Street: 2015. Westfield Rd. City: Madison, WI zip: 53717	Town City of Mall	11 /15/2011 (Month) (Day) (Year)	Email Phone			
Florence Poole	Dlane leale	Street: 3 Se bring Ct City: Madison Zip: 53719	Town City of MM City Machiner	(Month) (Day) (Year)	Email Phone			
ELINOR BECK	Eslinor a Beck	Street: 74 Oak Ceek To.  City: Madeion zip; 53717	Town City of MOM City MOM	11 /15 / 20 1 (Month) (Day) (Year)	Email Phone			
Mary Heyn	Mary Yeun	Street: 201 S. HighPunt apt City: Madison Zip: 53717	Drown City of MOM City Madison	// //5/20// (Month) (Day) (Year)	Email Phone			
Jeanne Allen	Jeanne allen	Street: 7 Red Oak Trail City: Mulison zip: 53717	Town City 87 Man City 81 Man C	// //5/20 ## (Month) (Day) (Year)	Email Phone			
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	ELINOR	BECK	Eliport	2 Beck	City: Malieta	zip; 53717	City	Madison	(Month) (Day) (Year)	Phone (
	9.				Street: 201 S. High Puni	apt	□ Town □ Village	city of Man	1 11 /15/2011	Email
	Mary 1	teun	Mary Leu	w	city: Madison	Zip: 53711	<b>√</b> City	MUCUSON	(Month) (Day) (Year)	Phone (
	10.	Λ 11	Jeanine	011.	Street: 7 Red Oc	ek Trail	□ Town □ Village	city of my	h 11 /15/2011	Email
	Jeanne	Hllen	June		cus: Madison	zip: 53717	<b>v</b> City ⊓	riduison	(Month) (Day) (Year)	Phone (
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I, _	Mary	Anne Mayl	new		tify): I reside at	<u>Cedar Creek</u>	Tr.	_ Madis	SON	
	,	(Name of Circu	lator)		(Circulator	's Residence – Street name an	d Number)	(Circulator	Municipality)	Circu
I per	rsonally circulated this rec	all petition and personally ob-	tained each of the signatures o	n this paper. I know that	the signers are electors of the jurisd	iction or district represented by the	officeholde	r named in this petition. I know	that each person signed	
the p	paper with full knowledge	of its content on the date indi	cated opposite his or her name	. I know their respective	residences given. I support this reca	all petition. I am aware that falsify	ng this certi	fication is punishable under S.12	2.13(3)(a), Wis. Stats.	
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Article XIII, Section 12 of the Wisconsin Con-	stitution and S.9.10 of the Wisconsin Statu	utes.			Ì	PO
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING		CON
1. Michael A Hughes	Michael a Blyl	Street: 903 Hwy V City: Marshell WI Zip: 53559	▼Town Uvillage York City	11 /15/20 1 (Month) (Day) (Year)	Email Phone	)
MARK J BISSEW	Mark of Bent	Street: 217 Wast Man Street  City: Bruthyn WI zip: 53521	Down Village City  Grooklyn	// //5/20/( (Month) (Day) (Year)	Phone (	
Jeffery M. Jones	feffery m. Jones	Street: 181 Sunset Ave City: Footville, WI zip: 53537	Town City Footville	//5/20 (Month) (Day) (Year)	Email Phone	
4.	That Valle	Street 6733 Tartan Tr CHy: Suu Praivie Zip: 53590	Town City  City	(Month) (Day) (Year)	Email Phone	
Bart Pana 5. Tames Breitzman	James Brutzfran	Street: 225 5 Mun St City: Lolumbus Zip: 53925	Town Village Columbus	// //5/20// (Month) (Day) (Year)	Email Phone	
JONATHAN R. HEISE	Donathan R Heise	Street: 16507 W. HAFEMAN RD  City: BROD HEAD Zip: 53520	Town Spring U4/14JY City CREDVILLE	11/15/20/11 (Month) (Day) (Year)	Email Phone	
7.		Street: City: Zip:	☐ Town ☐ Village ☐ City	/ /20	Phone (	
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I,	Jongthan	Young		, (certify): I reside at	206 Birch Hill	Dr	City of Madison
		Name of Circulator)		(Circ	ılator's Residence – Street nar	ne and Number)	(Circulator Municipality)
							d in this petition. I know that each person signed
the paper with full	l knowledge of its content	t on the date indicated oppo	osite his or her name I know th	eir respective residences given. I support t	nis recall petition. I am aware that t	falsifying this certification	is punishable under S.12.13(3)(a), Wis. Stats.
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.						
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DANIEL J. WAHL	Mulabl	Street: 5806 CRABAPPLE LY City: MAD (50% WI zip: 5371)	Town Uillage  Secity MAD 1500	(Month) (Day) (Year)	Email Phone	)
2. Andrew W Arbuckle 3. Goms R Arderson	andrew arbable	Street: N7879 Panorama City: Belleville zip: 53508	© Town □ Village □ City Fx OFEV	///5/20// (Month) (Day) (Year)	Phone (	)
3. Gors R Arderson	Day Adm	Street: 4622 Esch Lone City: Madism zip: 53764	□ Town □ Village  Sp City	11 /15/20 <u>11</u> (Month) (Day) (Year)	Email Phone	
4.		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)	Email Phone	
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			City:	Zîp:	□ City	(Month) (Day) (Year)	Ph
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_	Johathan F You (Name of Cir	<b>n</b> 4	ify): I reside at 6266 Bigs	4 HND-	City of M	4dison_	
		culator)	(Circulator's Res	ndence – Street name and		Municipality)	
e e	rsonally circulated this recall petition and personally c paper with full knowledge of its content on the date in	obtained each of the signatures on this paper. I know that adicated opposite his or her name. I know their respective	the signers are electors of the jurisdiction of the signers are electors of the signers are electors of the signers are electors of the signers.	or district represented by the tion. I am aware that falsifying	ng this certification is punishable under S.12	that each person signed 2.13(3)(a), Wis. Stats.	
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING		CON
1. John Arnolde	John C. anable	Street: 2472 Wanbera Hill Rd City: McFarland Zip: WI	Town ☐ Village ☐ City	11 /15/2011 (Month) (Day) (Year)	Email Phone	
2. THOMAS MILLER	Canno mila	Street: 305 OUSON CT  City: \$70064704 Zip: 53589	□ Town □ Village □ City  S TOU SHOW	(Month) (Day) (Year)	Email Phone	
3. Jason Laffin		street: 1304 Landmark Dr.  City: OCoHage Grave zip: 53527	□ Town St Village	11 /15/20 <u>11</u> (Month) (Day) (Year)	Email Phone	
4. FARSHUD FEM24	FarVIFT	Street: 5642 Silver Oak City: Fitchburg zip: W	Town Village Fr Tchby	(Month) (Day) (Year)	Email Phone	
5. Ronald E.Smith	Ronald & Smith	Street: 934 Irish Circle City: Sun Prairie zip: 53590	Town Village Sun Prairie	11 /15/2011 (Month) (Day) (Year)	Thone (	
Soeun Ouk	toe ok	Street: 2232 Meadow Gri City: Stong Wol zip: 53589	Town Stouton	(Month) (Day) (Year)	Email Phone	
7.		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)	Email Phone	)
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[,	Jonathan E Your	14	, (certify): I reside at	06 Birch Hill D	Cizy	of Madigu	,
	' (Name of Cir <u>cu</u>			culator's Residence – Street name		(Circulator Municipdlity)	·
	Ily circulated this recall petition and personally obt with full knowledge of its content on the date indi						
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUT Rural address must also include box or fire		DATE OF SIGNING	CO	
PAUL CARGILL	() m Elmi	Street: 509 PORTER RI City: EVANSVILLE Zip: 5 Street: 321 Duorak C+ #	3536 Town Village Town Fansille TY	11 /15/2011 (Month) (Day) (Year)	Email Paul Cav Phone (608)	
PAUL CARGILL 2. Brenda Jones	Gerda Junes	Street: 321 Duorak C+ # City: Stoughton zip: 53	306   Town   Village   Desty Stoughton W.	// //2/20_// (Month) (Day) (Year)	Phone ( )	
3.		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) / (Year)	Email Phone	
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10.	Street: City:	☐ Town ☐ Village ☐ City	/ /20(Month) (Day) (Year)
Jourton E Yours	Certification of Circulator , (certify): I reside at 6266 B	ich Hill Dr	Circof Madison
(Name of Circulator)  personally circulated this recall petition and personally obtained each of the signatures of the signatures of the signatures of the signatures of the signature of the signatures of the signature of the si	Circulator's Res this paper. I know that the signers are electors of the jurisdiction	sidence - Street name and Number) or district represented by the officeholder name	
the paper with full knowledge of its content on the date indicated opposite his or her name  (Month) / (Day) / 20 (Year)	(Signature of Circulator)	don. I am aware mat faishlying this certification	Page No. (Official Use Only)  # 492
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Article XIII, Section 12 of the Wisconsin Co.	nstitution and S.9.10 of the Wisconsin Stat	utes.			PO
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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	CO
1. Sara Landerud	Sofland	street: 526 w wilson street #105  City: Madison zip: 53703	□ Town □ Village □ City    Town		Email Phone
2. JOE GARRIA	JM Darcier		Town Village MAAISUN	\\\/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Email Phone
3. Les Soldsmith	Lesle HEOLILUS	Street: 8688 Messerschmidt Dr. City: Verona Zip: 53593	Town Utillage Springdale	// /5/20// (Month) (Day) (Year)	Email Phone
4. Samantha Brown	Samentho Brown	Street: 8688 Messerschmidd Dr.  City: Verona Zip: 53593	XTown   Springdale   City   C	11 /15/20 <u>71</u> (Month) (Day) (Year)	Email Phone ( )
Thomas Roynolds	Thanes of Regulate	Street: 3709 MORNING Rd #B  City: Madison Zip: 53704	Town Village ( adi)	11 /15/20 11 (Month) (Day) (Year)	Email Phone
Jodi Meier	CHO Elli	Street: 1245 E. Dayton St#4  City: Made Son Zip: 53703	Uniform City Springfield		Email Phone
Janiel Meier	Oxwell 1	Street: 7527 KICKAboo Rd City: Waynakee, WI zip: 53597	Town Village Springfield	// /15/20// (Month) (Day) (Year)	Phone ((O) 8)
8. Jane Brotman	Sane Brotman	Street: 811 No. Gammon Rd City: Maduon Wl Zip: 53717	Town Village Maduspn	11 /15/2011 (Month) (Day) (Year)	Email Phone
Asnley Swanberg	amenjswannerj	Street: 3041 Maple Valley Dr. City: APT #102 Madison zip: 53719	Town Village Mad 1801	V/ /15/20/// (Month) (Day) (Year)	Email Phone
Nancy Hutson	Hanly-Hutson	Street: 2524 Wannong Le rey City: Mash son Le Zip: \$25371=	Town Village Madison	/) / 15/20_11 (Month) (Day) (Year)	Email Phone
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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to

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PRINTED NAMES OF ELECTORS	SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	VOTING MUNICIPALITY OF RESIDENCE (Indicate Town, City, or Village)	DATE OF SIGNING	СО
	magazer Wallepied	Street: 6513 Jacobs Way 53711 City: Madison zip: 43411	Town Village MaddSon	11 / 15/2011 (Month) (Day) (Year)	Email Mageret wake Phone ()
2. Eric Graf	E M	Street: 1360 Regent St  City: Madison   W1 zip: 53715	Town Village PCity Madison	// 15 /2011 (Month) (Day) (Year)	Email Phone
3.		Street:  City: Zip:	☐ Town ☐ Village ☐ City	/ /20	Phone ( )
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Jane Brotman		n of Circulator  Sertify): I reside at SII No Jammon Rd	City of A	ladis i	Circulators, p

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Jane Brotma	, (certi	ify): I reside at SII No .	Jammon Rd	<u>C</u>	ity of M	adis i	
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personally circulated this recall petition and personally ob e paper with full knowledge of its content on the date indi							
$\frac{1}{\text{(Month)}} / \frac{5}{\text{(Day)}} / \frac{20}{\text{(Year)}}$	1 Ja	Ne bust ma (Signature of Circulator)			Page No. (Offi	icial Use Only)	
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Return by J To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Committee 1 Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes. PO Box 256 Madison, W THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. NAME OF VOTING STREET & NUMBER OR RURAL ROUTE MUNICIPALITY OF RESIDENCE DATE OF SIGNING CONT NAME & SIGNATURES OF ELECTORS Rural address must also include box or fire no. (Also Indicate Town, City, or Village) 1. □ Town ₹ Village ☐ City Phone (*(d*)8 Email □ Town □ Village Deity Phone ☐ Town ☐ Village ☐ City ☐ Town ☐ Village

Sign: Churcy F Rth	City: MacUSON Zip: 537/	Madison (Municipality Name)	(Month) (Day) (Year)	Phone (
5. Print: Kathryn Aldin Sign: Juthn Aldin	509 N. Franklin Ave. street: Apt. #4 Madisan, W± 53711	□ Town □ Village ▼ City  Mad Sov (Municipality Name)	// /15/20_// (Month) (Day) (Year)	Email SM doc AMMON Phone (LOS)
	Certification of Circulator	· vd/		

(Circulator's Residence - Street Name and Number)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

bey(certify): I reside at 514

(Month)

(Day)

Page No. (Official Use Only) (Signature of Circulator)

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Phone

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by Committee

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.  THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.						
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONT		
1. Print: PATRICE Streicher sign: Patrice Streicher	Street: 2804 Gregory Freet  City: MADISON Zip: 53711	Town Village City  (Municipality Name)	// 5/20// (Month) (Day) (Year)	Phone (608)		
2.  Print: Americanie M Moth  sign Cenna Marie M Myst	Street: 556 Elln Dr City: Madison 21p: 53711	□ Town □ Village ▼ City  Madusan  (Municipality Name)	// /5/20_// (Month) (Day) (Year)	Phone (608		
3. LISA MCLENNAN Stem: Stem:	4242 Mandan Crescent Street: 53711	Town Village City (Municipality Name)	U /15/2011 (Month) (Day) (Year)	Email 1150 F N Phone Le 08		
4. Print: Nathan Dowd Sign: Davd	Street: & Const of Brixham  Chy: Madison Zip: 53705	Town Village City  Mudi So  (Municipality Name)		Mado Phone (608		
5. Petat: MARY L. QUINN-GRUBE Styre: MDQuism-Hulver	R Street: 514 GLENWAY ST City: MADISON ZID: 53711	Town Village tyCity  (Municipality Name)	// /15/20// (Month) (Day) (Year)	Email  tiptop  Phone  (608		
Certification of Circulator						
I, Dought Winn - Cruber (Printed Name of Circulator)	(certify): I reside at 514 Glenway (Circulator's Residence – Street Name and Nu	(Circulator Munic	cipality)	Circulators, Please include your o		

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Madison, W THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. NAME OF VOTING MUNICIPALITY OF RESIDENCE STREET & NUMBER OR RURAL ROUTE DATE OF SIGNING CONT NAME & SIGNATURES OF ELECTORS (Also Indicate Town, City, or Village) Rural address must also include box or fire no. Email ☐ Town ☐ Village City ☐ Town □ Village City (608) □ Town
□ Village ☑ City □ Town 1923 Village City (Municipality Name) ☐ Town 2009 □ Village **C**ity (608 **Certification of Circulator** 

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.43(3)(a). Wis Stats.

(certify): I reside at 5 14

call petition. I am aware that falsifying this certification is punishable under S:12-19(3)(a), was

(Month) (Day) / 20 | (Year)

(Printed Name of Circulator)

(Signature of Chreulator)

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Return by J

Committee 1

PO Box 256

Circulators,
Please include your of
Phone
Email

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To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Madison, W THE MUNICIPALITY USED FOR MAILING PURPOSES. WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED. NAME OF VOTING MUNICIPALITY OF RESIDENCE CONT NAME & SIGNATURES OF ELECTORS STREET & NUMBER OR RURAL ROUTE DATE OF SIGNING Rural address must also include box or fire no. (Also Indicate Town, City, or Village) □ Town ☐ Village Glenway 11/15/2011 City □ Town □ Village 11/15/2011 City □ Town Z Village ☐ City □ Town □ Village □ Town ☐ Village City (Municipality Name) 608 Certification of Circulator I, Doughs Quinn-Gruber, (certify): I reside at 514 Clenusy Steet
(Printed Name of Circulator) (Circulator's Residence - Street Name and Number) Circulators, (Circulator Municipality) Please include your c Phone

I, Doughs Original Ceruser, (certify): I reside at 514 Genusy Sceet (Circulator's Residence - Street Name and Number) (Circulator Municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

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Return by J.

Committee t

PO Box 256

To the Wisconsin Government Accountability Board: We, the undersigned qualified electors of the State of Wisconsin petition for the recall of Governor Scott Walker from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and S.9.10 of the Wisconsin Statutes.

Return by J. Committee 1

THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.  THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.					
NAME & SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	NAME OF VOTING MUNICIPALITY OF RESIDENCE (Also Indicate Town, City, or Village)	DATE OF SIGNING	CONTA	
1. Print: Kay Engelbrecht Signs Day Engellut	Street: 2581 Smith xing #209 City: Sun Prairie Zip: 535	Extrown   Village   City   Swa Prairie   (Municipality Name)	11/15/2011 (Month) (Day) (Year)	Phone (608)	
2. Print: Barbara McGrath Sign: Flym hath	Street: 3815 monona Dr. #30,	□ Town □ Village  ▼City  (Municipality Name)		Phone (608)	
3. Frace Huges Sin Drace Heres	Street L838 Yulage Park DR	Town Village City (Municipality Name)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Email Phone (GOS)	
4. Print: Nicole Young Sign: Mole Young	street: 115 Cdumbia Circle  City: Manana, NI zip: 53716	Town Village DYCity  (Municipality Name)	1   //5/2011 (Month) (Day) (Year)	Phone (608)	
5. Print: MOHAMED MAAL:	Street: 33679LANDDR Cly: MANISON zip: 53705	☐ Town ☐ Village  ☐ City  (Municipality Name)	(Manth) (Day) (Year)	Phone (CoC)	
Certification of Circulator  I, Dougle Olim Gules (certify): I reside at 5 14 Clenuar St.  (Circulator's Residence - Street Name and Number)  (Circulator Municipality)					

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under S.12.13(3)(a), Wis. Stats.

/	15	/20 )	Della Dende
(Month)	(Day)	(Year)	(Signature of Circulator)
			······································

U-(Printed Name of Circulator)

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Please include your co.

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## NOTSUBMITTED